24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼
	C C00489799
Check if 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee Moxie Media Inc.	Date of Public Distribution/Dissemination
Mailing Address 2021 Minor Ave. East	08 19 2016 Amount
City State Zip Code	5000.00
Seattle WA 99102	Transaction ID : B623460 Date of Disbursement or Obligation
Purpose of Expenditure Canvass Lit Category/ Type 004	08 19 2016
Lillam Clinton	Sought: House District: President Senate State: US
	rsement For: Primary General Other (specify)
Full Name of Payee Terris Barnes & Walters	Date of Public Distribution/Dissemination
Mailing Address 400 Montgomery St # 700	08 / 19 / 2016 Amount
City State Zip Code	1732.66
	Transaction ID : B623461 Date of Disbursement or Obligation
Purpose of Expenditure Canvass Lit-Estimated costs Category/ Type 004	08 / 19 / 2016
Hillary Clinton	Sought: House District: President Senate State: US
	rsement For: ☐ Primary ☐ General ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	6732.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not ma with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Deirdre Schifeling [Electronically Filed] Date	B 19 2016
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	I EXI END	ITORIES		PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report X 48-hour report	New rep	ort Amends repo	ort filed on	M / D D / Y B Y B Y B Y
Full Name of Payee Terris Barnes & Walters			M	of Public Distribution/Dissemination
Mailing Address 400 Montgomery St # 700			Amour	08 19 2016 nt
City	State	Zip Code		1732.67
San Francisco	CA	94104		action ID : B623463 If Disbursement or Obligation
Purpose of Expenditure Canvass Lit-Estimated costs		Category/ Type 004	М	08 19 / 2016
Name of Federal Candidate		Support	Office Sought	: House District:
Katie McGinty		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	, , ,	1902005.23	Disbursement 2016 Of	t For:
Full Name of Payee	-		Date of	of Public Distribution/Dissemination
Moxie Media Inc.			M	08 19 2016
Mailing Address 2021 Minor Ave. East				
			Amou	nt
City	State	Zip Code		5000.00
Seattle	WA	99102		ction ID : B623457 of Disbursement or Obligation
Purpose of Expenditure Canvass Lit		Category/ Type 004		08 / D D / Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sough	t: House District:
Rob Portman		X Oppose	Preside	ent Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	, , ,	607703.64	Disbursemen 2016 O	t For: Primary X General ther (specify) ▶
•				
(a) SUBTOTAL of Itemized Independent Expenditure	es		. •	6732.67
(b) SUBTOTAL of Unitemized Independent Expendit	tures		· •	7 1 7 1 7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Deirdre Schifeling	[Electron	ically Filed] Date	9 08	19 2016
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LINDLINI EXPENDI	TOTILS		PAGE 3 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
Planned Parenthood Votes			С	C00489799
Check if 24-hour report X 48-hour re	eport New repo	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee Moxie Media Inc.			M = M	c Distribution/Dissemination
Mailing Address 2021 Minor Ave. East			08 Amount	19 2016
City	State	Zip Code		5000.00
Seattle	WA	99102	Transaction Date of Disbu	ID: B623458 ursement or Obligation
Purpose of Expenditure Canvass Lit		Category/ Type 004	08	19 / 2016
Name of Federal Candidate		X Support	Office Sought:	House District:
Ted Strickland		Oppose	President	Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		607703.64	Disbursement For: 2016 Other (sp	Primary
Full Name of Payee Terris Barnes & Walters			Date of Publi	ic Distribution/Dissemination
			08	19 2016
Mailing Address 400 Montgomery St #	700		Amount	
City	State	Zip Code		1732.67
San Francisco	CA	94104	Transaction II Date of Disb	D : B623464 ursement or Obligation
Purpose of Expenditure Canvass Lit-Estimated costs		Category/ Type 004	M 08	19 2016
Name of Federal Candidate		Support	Office Sought:	House District:
Pat Toomey		Oppose	President	Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		1902005.23	Disbursement For: 2016 Other (s	Primary
(a) SUBTOTAL of Itemized Independent E	expenditures)	6732.67
(b) SUBTOTAL of Unitermized Independent	t Expenditures		>	
(c) TOTAL Independent Expenditures)	
Under penalty of perjury I certify that the with, or at the request or suggestion of, at party committee) any political party commit	ny candidate or authorized			
Deirdre Schifeling Signature	[Electron	ically Filed] Date	08 / 19	2016

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DENT EXICIO	HONES		PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	DIDENTIFICATION NUMBER ▼
Planned Parenthood Votes			С	C00489799
Check if 24-hour report X 48-hour repo	rt New rep	port Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee			Date of Pu	ublic Distribution/Dissemination
Moxie Media Inc.			08	/ 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2021 Minor Ave. East			Amount	
City	State	Zip Code		5000.00
Seattle	WA	99102		on ID : B623459 sbursement or Obligation
Purpose of Expenditure Canvass Lit		Category/ Type 004	08	19 2016
Name of Federal Candidate		Support	Office Sought:	House District:
Donald Trump		X Oppose	President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought		773609.49	Disbursement For 2016 Other	r: Primary X General (specify) ▶
Full Name of Payee			Date of Pu	ublic Distribution/Dissemination
Terris Barnes & Walters			08 08	19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 400 Montgomery St # 700			Amount	
City	State	Zip Code		1732.67
San Francisco	CA	94104		n ID : B623462 isbursement or Obligation
Purpose of Expenditure Canvass Lit-Estimated costs		Category/ Type 004	08 08	19 / 2016
Name of Federal Candidate		Support	Office Sought:	House District:
Donald Trump		Oppose	President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought		773609.49	Disbursement Fo 2016 Other	r:
(a) SUBTOTAL of Itemized Independent Expe	enditures			6732.67
(4) 000101112 01 110111203 1113050113011 2.150				0732.07
(b) SUBTOTAL of Unitemized Independent Ex	rpenditures		•	7 7 7
(c) TOTAL Independent Expenditures			•	26930.67
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Deirdre Schifeling Signature	[Electron	nically Filed] Date		9 2016
- 😈				